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Attorney's Docket No. S1022/8338

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Neil RICHARDS, Gajinder Singh PANESAR, John CAREY and Peter THOMPSON  
Serial No.: 09/413,644  
Filing Date: October 6, 1999  
For: DATA TRANSFER

Examiner: Unassigned  
Art Unit: 2735

Box Missing Parts  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir/Madam:

Transmitted herewith for filing is/are the following document(s):

- ☒ Notice to File Missing Parts
- ☒ Petition for Extension of Time
- ☒ Declaration and Power of Attorney
- ☒ Assignment and Coversheet
- ☒ Information Disclosure Statement/PTO 1449 W/Cited References
- ☒ Certified Copy of United Kingdom Priority Application No. 9821770.6
- ☒ Return Post Card

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned collect at (617)720-3500, Boston, Massachusetts.

A check in the amount of \$930.00 is enclosed to cover the filing fee. If the fee is insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this document is being placed in the United States mail with first-class postage attached, addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 on January 28, 2000.

Attorney Docket No.: S1022/8338  
X 01/28/00

Respectfully submitted,

James H. Morris  
Reg. No.: 34,681  
WOLF, GREENFIELD & SACKS, P.C.  
600 Atlantic Avenue  
Boston, Massachusetts 02210  
Tel. (617) 720-3500



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Assignment Branch  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir/Madam:

Transmitted herewith for filing is/are the following document(s):

- ☒ Assignment and Coversheet
- ☒ Return Post Card

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned collect at (617)720-3500, Boston, Massachusetts.

A check in the amount of \$40.00 is enclosed to cover the filing fee. If the fee is insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

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600 Atlantic Avenue  
Boston, Massachusetts 02210  
Tel. (617) 720-3500

APPLICATION NUMBER	RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
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09/413,644 10/06/99 N/A

S1022/8338

0212/1028

JAMES H MORRIS  
WOLF GREENFIELD & SACKS  
600 ATLANTIC AVENUE  
BOSTON MA 02210

NOT ASSIGNED

DATE MAILED: 2735

10/28/99

### NOTICE TO FILE MISSING PARTS OF APPLICATION

*Filing Date Granted*

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☒ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☐ non-small entity is \$ 240.00.

☒ 1. The statutory basic filing fee is:

- ☐ missing.  
☐ insufficient.

Applicant must submit \$ 760.00 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

☐ 2. The following additional claims fees are due:

\$ \_\_\_\_\_ for \_\_\_\_\_ total claims over 20.  
\$ \_\_\_\_\_ for \_\_\_\_\_ independent claims over 3.  
\$ \_\_\_\_\_ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

☒ 3. The oath or declaration:

- ☐ is missing or unsigned.  
☐ does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

☐ 7. Your filing receipt was mailed in error because your check was returned without payment.

☐ 8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

☐ 9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

**A copy of this notice MUST be returned with the reply.**

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

09413644  
00000088 232825  
02/03/2000 CCETIN  
01 FC:105  
02 FC:101  
130.00 OP  
690.00 OP  
70.00 CH